

Overview of DMH Initial Performance Measures for Full Service Partnerships

PAF = Partnership Assessment Form (when partnership is established)

KET = Key Event Tracking (completed for key areas when change occurs)

3M = Quarterly Assessment (status updated every three months)

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
Client Information	<u>PAF/KET/3M:</u> County ID County Client Number (link to CSI) Partnership/Assessment Date Disenrollment Date Child/Youth First/Last Name Provider Site ID Full Service Partnership Program ID Partnership Service Coordinator ID Child/Youth's Date of Birth County Use Fields	<u>PAF/KET/3M:</u> County ID County Client Number (link to CSI) Partnership/Assessment Date Disenrollment Date Youth First/Last Name Provider Site ID Full Service Partnership Program ID Partnership Service Coordinator ID Youth's Date of Birth Youth's current program involvement: <ul style="list-style-type: none"> ▪ AB2034 ▪ Governor's Homeless Initiative ▪ Transition Age Youth Program County Use Fields	<u>PAF/KET/3M:</u> County ID County Client Number (link to CSI) Partnership/Assessment Date Disenrollment Date First/Last Name Provider Site ID Full Service Partnership Program ID Partnership Service Coordinator ID Date of Birth Current program involvement: <ul style="list-style-type: none"> ▪ AB2034 ▪ Governor's Homeless Initiative County Use Fields	<u>PAF/KET/3M:</u> County ID County Client Number (link to CSI) Partnership/Assessment Date Disenrollment Date First/Last Name Provider Site ID Full Service Partnership Program ID Partnership Service Coordinator ID Date of Birth Current program involvement: <ul style="list-style-type: none"> ▪ AB2034 ▪ Governor's Homeless Initiative County Use Fields
Referral Source	<u>PAF:</u> Who referred the child/youth for this partnership? <ul style="list-style-type: none"> ▪ Self ▪ Family Member (e.g. parent, guardian, sibling, aunt, uncle, grandparent) ▪ Significant Other (e.g., boyfriend/girlfriend, spouse) ▪ Friend/Neighbor (i.e., unrelated other) ▪ School ▪ Primary Care/Medical Office ▪ Emergency Room ▪ Mental Health Facility/Community Agency ▪ Social Services Agency ▪ Substance Abuse Treatment Facility/Agency ▪ Other County/Community Agency ▪ Homeless Shelter ▪ Street Outreach ▪ Juvenile Hall/Camp/Ranch/CYA ▪ Acute Psych/State Hospital ▪ Other 	<u>PAF:</u> Who referred the youth for this partnership? <ul style="list-style-type: none"> ▪ Self ▪ Family Member (e.g. parent, guardian, sibling, aunt, uncle, grandparent) ▪ Significant Other (e.g., boyfriend/girlfriend, spouse) ▪ Friend/Neighbor (i.e., unrelated other) ▪ School ▪ Primary Care/Medical Office ▪ Emergency Room ▪ Mental Health Facility/Community Agency ▪ Social Services Agency ▪ Substance Abuse Treatment Facility/Agency ▪ Other County/Community Agency ▪ Homeless Shelter ▪ Street Outreach ▪ Juvenile Hall/Camp/Ranch/CYA ▪ Jail/Prison ▪ Acute Psych/State Hospital ▪ Other 	<u>PAF:</u> Who referred the client for this partnership? <ul style="list-style-type: none"> ▪ Self ▪ Family Member (e.g. parent, guardian, sibling, aunt, uncle, grandparent, child) ▪ Significant Other (e.g., boyfriend/girlfriend, spouse) ▪ Friend/Neighbor (i.e., unrelated other) ▪ School ▪ Primary Care/Medical Office ▪ Emergency Room ▪ Mental Health Facility/Community Agency ▪ Social Services Agency ▪ Substance Abuse Treatment Facility/Agency ▪ Other County/Community Agency ▪ Homeless Shelter ▪ Street Outreach ▪ Jail/Prison ▪ Acute Psych/State Hospital ▪ Other 	<u>PAF:</u> Who referred the client for this partnership? <ul style="list-style-type: none"> ▪ Self ▪ Family Member (e.g. parent, guardian, sibling, aunt, uncle, child) ▪ Significant Other (e.g., boyfriend/girlfriend, spouse) ▪ Friend/Neighbor (i.e., unrelated other) ▪ School ▪ Primary Care/Medical Office ▪ Emergency Room ▪ Mental Health Facility/Community Agency ▪ Social Services Agency ▪ Substance Abuse Treatment Facility/Agency ▪ Other County/Community Agency ▪ Homeless Shelter ▪ Street Outreach ▪ Jail/Prison ▪ Acute Psych/State Hospital ▪ Other

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
Residential (includes hospitalization & incarceration)	<p>PAF/KET: Child/Youth's Residential Situations (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY):</p> <p>General Living Arrangements</p> <ul style="list-style-type: none"> With one or both biological / adoptive parents With adult family member(s) other than parent(s) – non-foster care In apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage Foster Home (with relative) Foster Home (with non-relative) <p>Shelter / Homeless</p> <ul style="list-style-type: none"> Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent) Homeless (includes people living in their cars) <p>Hospital</p> <ul style="list-style-type: none"> Acute Medical Hospital Acute Psychiatric Hospital / Psychiatric Health Facility (PHF) State Psychiatric Hospital <p>Residential Program</p> <ul style="list-style-type: none"> Group Home (Level 0-11) Group Home (Level 12-14) Community Treatment Facility Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs) <p>Justice Placement</p> <ul style="list-style-type: none"> Juvenile Hall / Camp / Ranch California Youth Authority <p>Other Unknown</p>	<p>PAF/KET: Youth's Residential Situations (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY):</p> <p>General Living Arrangements</p> <ul style="list-style-type: none"> With one or both biological / adoptive parents With adult family member(s) other than parents – non-foster care In apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage Single Room Occupancy (must hold lease) Foster Home (with relative) Foster Home (with non-relative) <p>Shelter / Homeless</p> <ul style="list-style-type: none"> Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent) Homeless (includes people living in their cars) <p>Supervised Placement</p> <ul style="list-style-type: none"> Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants, etc.) Unlicensed but supervised congregate placement (includes group living homes, sober living homes) Licensed Community Care Facility (Board and Care) <p>Hospital</p> <ul style="list-style-type: none"> Acute Medical Hospital Acute Psychiatric Hospital / Psychiatric Health Facility (PHF) State Psychiatric Hospital <p>Residential Program</p> <ul style="list-style-type: none"> Group Home (Level 0-11) Group Home (Level 12-14) Community Treatment Facility Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs) Skilled Nursing Facility (physical) Skilled Nursing Facility (psychiatric) Long-Term Institutional Care (IMD, MHRC) <p>Justice Placement</p> <ul style="list-style-type: none"> Juvenile Hall / Camp / Ranch 	<p>PAF/KET: Client's Residential Situations (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY):</p> <p>General Living Arrangements</p> <ul style="list-style-type: none"> In apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage With one or both biological / adoptive parents With adult family member(s) other than parents Single Room Occupancy (must hold lease) <p>Shelter / Homeless</p> <ul style="list-style-type: none"> Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent) Homeless (includes people living in their cars) <p>Supervised Placement</p> <ul style="list-style-type: none"> Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants, etc.) Assisted Living Facility Unlicensed but supervised congregate placement (includes group living homes, sober living homes) Licensed Community Care Facility (Board and Care) <p>Hospital</p> <ul style="list-style-type: none"> Acute Medical Hospital Acute Psychiatric Hospital / Psychiatric Health Facility (PHF) State Psychiatric Hospital <p>Residential Program</p> <ul style="list-style-type: none"> Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs) Skilled Nursing Facility (physical) Skilled Nursing Facility (psychiatric) Long-Term Institutional Care (IMD, MHRC) <p>Justice Placement</p> <ul style="list-style-type: none"> Jail Prison <p>Other</p>	<p>PAF/KET: Client's Residential Situations (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY):</p> <p>General Living Arrangements</p> <ul style="list-style-type: none"> In apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage With one or both biological / adoptive parents With adult family member(s) other than parents Single Room Occupancy (must hold lease) <p>Shelter / Homeless</p> <ul style="list-style-type: none"> Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent) Homeless (includes people living in their cars) <p>Supervised Placement</p> <ul style="list-style-type: none"> Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants, etc.) Assisted Living Facility Unlicensed but supervised congregate placement (includes group living homes, sober living homes) Licensed Community Care Facility (Board and Care) <p>Hospital</p> <ul style="list-style-type: none"> Acute Medical Hospital Acute Psychiatric Hospital / Psychiatric Health Facility (PHF) State Psychiatric Hospital <p>Residential Program</p> <ul style="list-style-type: none"> Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs) Skilled Nursing Facility (physical) Skilled Nursing Facility (psychiatric) Long-Term Institutional Care (IMD, MHRC) <p>Justice Placement</p> <ul style="list-style-type: none"> Jail Prison <p>Other</p>

Domain/Measure	<u>Child/Youth (0 - 15 years)</u>	<u>TAY (16 - 25 years)</u>	<u>Adult (26 – 59 years)</u>	<u>Older Adult (60+ years)</u>
		<ul style="list-style-type: none">• California Youth Authority• Jail• Prison <p>Other Unknown</p>	Unknown	Unknown

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
Education	<p>PAF/KET: What was the child/youth's highest level of education completed?</p> <ul style="list-style-type: none"> Day Care Preschool Kindergarten 1st – 11th grade (individually listed) GED coursework High School diploma / GED Less than 2 years college / Some Technical/Vocational Training AA Degree Technical/Vocational Degree Level Unknown (e.g., child/youth in non-public school) <p>PAF/3M: Is the child/youth CURRENTLY receiving:</p> <ul style="list-style-type: none"> Special education for SED? Y/N Special education for another reason? Y/N <p>PAF/3M: Estimate the child/youth's attendance level* (DURING THE LAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> Always attends school (never truant) Attends school most of the time Sometimes attends school Infrequently attends school Never attends school <p>*excludes scheduled breaks & excused absences</p>	<p>PAF/KET: What was the youth's highest level of education completed?</p> <ul style="list-style-type: none"> Day Care Preschool Kindergarten 1st – 11th grade (individually listed) GED coursework High School diploma / GED Less than 2 years college / Some Technical/Vocational Training AA Degree Technical/Vocational Degree 3-4 Years College Bachelor's Degree (B.A., B.S.) Less than 2 years graduate school Master's degree (M.A., M.S.W.) 3-4 years graduate training Doctoral degree (M.D., Ph.D.) Level Unknown (e.g., youth in non-public school) <p>PAF/3M: Is the youth CURRENTLY receiving:</p> <ul style="list-style-type: none"> Special education due to SED? Y/N Special education due to another reason? Y/N <p>PAF/3M: If the youth is required by law to attend school, estimate the youth's attendance level* (DURING THE LAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> Always attends school (never truant) Attends school most of the time Sometimes attends school Infrequently attends school Never attends school <p>*excludes scheduled breaks & excused absences</p>	<p>PAF/KET: What was the client's highest level of education completed?</p> <ul style="list-style-type: none"> No High School Diploma / No GED GED coursework High School diploma / GED Less than 2 years college / Some Technical/Vocational Training AA Degree Technical/Vocational Degree 3-4 Years College Bachelor's Degree (B.A., B.S.) Less than 2 years graduate school Master's degree (M.A., M.S.W.) 3-4 years graduate training Doctoral degree (M.D., Ph.D.) <p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p>	<p>PAF/KET: What was the client's highest level of education completed?</p> <ul style="list-style-type: none"> No High School Diploma / No GED GED coursework High School diploma / GED Less than 2 years college / Some Technical/Vocational Training AA Degree Technical/Vocational Degree 3-4 Years College Bachelor's Degree (B.A., B.S.) Less than 2 years graduate school Master's degree (M.A., M.S.W.) 3-4 years graduate training Doctoral degree (M.D., Ph.D.) <p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p>

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
	<p>PAF/3M: The child's/youth's grades are (LAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> • Very good • Good • Average • Below average • Poor <p>PAF/ KET: (LAST 12 MONTHS and CURRENTLY)</p> <ul style="list-style-type: none"> ▪ Number of suspension(s) ▪ Number of expulsion(s) <p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p>	<p>PAF/3M: The youth's grades are (LAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> • Very good • Good • Average • Below average • Poor <p>PAF/ KET: (LAST 12 MONTHS and CURRENTLY)</p> <ul style="list-style-type: none"> ▪ Number of suspension(s) ▪ Number of expulsion(s) <p>PAF/KET: If the youth is NOT required by law to attend school, indicate how many weeks the youth was in the following educational settings (DURING THE LAST 12 MONTHS and CURRENTLY) (mark all that apply):</p> <ul style="list-style-type: none"> ▪ Not in school of any kind ▪ High School / Adult Education ▪ Technical / Vocational School ▪ Community College / 4 Year College ▪ Graduate School ▪ Other <p>KET: If stopping school, did the youth complete his/her course/program? Y/N</p> <p>PAF/KET: Does one of the youth's current recovery goals include any kind of education at this time? Y/N</p>	<p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p> <p>PAF/KET: Indicate how many weeks the client was in the following educational settings (DURING THE LAST 12 MONTHS and CURRENTLY) (mark all that apply):</p> <ul style="list-style-type: none"> ▪ Not in school of any kind ▪ High School / Adult Education ▪ Technical / Vocational School ▪ Community College / 4 Year College ▪ Graduate School ▪ Other <p>KET: If stopping school, did the client complete his/her course/program? Y/N</p> <p>PAF/ KET: Does one of the client's current recovery goals include any kind of education at this time? Y/N</p>	<p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p> <p>PAF/KET: Indicate how many weeks the client was in the following educational settings (DURING THE LAST 12 MONTHS and CURRENTLY) (mark all that apply):</p> <ul style="list-style-type: none"> ▪ Not in school of any kind ▪ High School / Adult Education ▪ Technical / Vocational School ▪ Community College / 4 Year College ▪ Graduate School ▪ Other <p>KET: If stopping school, did the client complete his/her course/program? Y/N</p> <p>PAF/ KET: Does one of the client's current recovery goals include any kind of education at this time? Y/N</p>
Employment	<p>PAF/KET: DURING THE LAST 12 MONTHS and CURRENTLY, indicate how many weeks the child/youth was employed at each setting:</p> <ul style="list-style-type: none"> ▪ Paid competitive 	<p>PAF/KET: DURING THE LAST 12 MONTHS and CURRENTLY, indicate how many weeks the youth was employed at each setting:</p> <ul style="list-style-type: none"> ▪ Paid competitive 	<p>PAF/KET: DURING THE LAST 12 MONTHS and CURRENTLY, indicate how many weeks the client was employed at each setting:</p> <ul style="list-style-type: none"> ▪ Paid competitive 	<p>PAF/KET: DURING THE LAST 12 MONTHS and CURRENTLY, indicate how many weeks the client was employed at each setting:</p> <ul style="list-style-type: none"> ▪ Paid competitive

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
	<ul style="list-style-type: none"> ▪ Paid Supported/Transitional (job open to competition with other clients) ▪ Paid In-House (work experience, job not open to competition) ▪ Non-paid (volunteer) work ▪ Other employment-type activity (e.g., can collecting, mowing lawns, babysitting, etc.) ▪ Unemployed <p>PAF/3M: On average, how many hours per week did the child/youth work DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: On average, how much did the child/youth earn from employment DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: Does one of the child/youth's current recovery goals include any kind of employment at this time? Y/N</p>	<ul style="list-style-type: none"> ▪ Paid Supported/Transitional (job open to competition with other clients) ▪ Paid In-House (work experience, job not open to competition) ▪ Non-paid (volunteer) work ▪ Other employment-type activity (e.g., can collecting, mowing lawns, babysitting, etc.) ▪ Unemployed <p>PAF/3M: On average, how many hours per week did the youth work DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: On average, how much did the youth earn from employment DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: Does one of the youth's current recovery goals include any kind of employment at this time? Y/N</p>	<ul style="list-style-type: none"> ▪ Paid Supported/Transitional (job open to competition with other clients) ▪ Paid In-House (work experience, job not open to competition) ▪ Non-paid (volunteer) work ▪ Other employment-type activity (e.g., can collecting, mowing lawns, babysitting, etc.) ▪ Unemployed <p>PAF/3M: On average, how many hours per week did the client work DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: On average, how much did the client earn from employment DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: Does one of the client's current recovery goals include any kind of employment at this time? Y/N</p>	<ul style="list-style-type: none"> ▪ Paid Supported/Transitional (job open to competition with other clients) ▪ Paid In-House (work experience, job not open to competition) ▪ Non-paid (volunteer) work ▪ Other employment-type activity (e.g., can collecting, mowing lawns, babysitting, etc.) ▪ Unemployed <p>PAF/3M: On average, how many hours per week did the client work DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: On average, how much did the client earn from employment DURING THE LAST 12 MONTHS and CURRENTLY?</p> <p>PAF/3M: Does one of the client's current recovery goals include any kind of employment at this time? Y/N</p>
Sources of Financial Support	<p>PAF/3M: Indicate all the sources of financial support used to meet the needs of the child/youth (mark all that apply) (DURING THE PAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> ▪ Caregiver Wages ▪ Child / Youth Wages ▪ Youth's Spouse / Significant Other's Wages ▪ Savings ▪ Child Support ▪ Other Family Member / Friend ▪ Retirement / Social Security Income ▪ Veteran's Assistance Benefits ▪ Loan / Credit 	<p>PAF/3M: Indicate all the sources of financial support used to meet the needs of the youth (mark all that apply) (DURING THE PAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> ▪ Caregiver Wages ▪ Youth Wages ▪ Youth's Spouse / Significant Other's Wages ▪ Savings ▪ Child Support ▪ Other Family Member / Friend ▪ Retirement / Social Security Income ▪ Veteran's Assistance Benefits 	<p>PAF/3M: Indicate all the sources of financial support used to meet the needs of the client (mark all that apply) (DURING THE PAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> ▪ Client Wages ▪ Spouse / Significant Other's Wages ▪ Savings ▪ Other Family Member / Friend ▪ Retirement / Social Security Income ▪ Veteran's Assistance Benefits ▪ Loan / Credit ▪ Housing Subsidy 	<p>PAF/3M: Indicate all the sources of financial support used to meet the needs of the client (mark all that apply) (DURING THE PAST 12 MONTHS and CURRENTLY):</p> <ul style="list-style-type: none"> ▪ Client Wages ▪ Spouse / Significant Other's Wages ▪ Savings ▪ Other Family Member / Friend ▪ Retirement / Social Security Income ▪ Veteran's Assistance Benefits ▪ Loan / Credit ▪ Housing Subsidy

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
	<ul style="list-style-type: none"> Housing Subsidy General Relief / General Assistance Food Stamps Temporary Assistance for Needy Families (TANF) Supplemental Security Income / State Social Pension Insurance Social Security Disability Insurance State Disability Insurance American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) Other 	<ul style="list-style-type: none"> Loan / Credit Housing Subsidy General Relief / General Assistance Food Stamps Temporary Assistance for Needy Families (TANF) Supplemental Security Income / State Social Pension Insurance Social Security Disability Insurance State Disability Insurance American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) Other 	<ul style="list-style-type: none"> General Relief / General Assistance Food Stamps Temporary Assistance for Needy Families (TANF) Supplemental Security Income / State Social Pension Insurance Social Security Disability Insurance State Disability Insurance American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) Other 	<ul style="list-style-type: none"> General Relief / General Assistance Food Stamps Temporary Assistance for Needy Families (TANF) Supplemental Security Income / State Social Pension Insurance Social Security Disability Insurance State Disability Insurance American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) Other
Legal Issues/Designations	<p><u>PAF/KET - Arrest:</u></p> <ul style="list-style-type: none"> Indicate the number of times the child/youth has been arrested (PRIOR TO THE LAST 12 MONTHS and DURING THE LAST 12 MONTHS). <p><u>PAF/KET - Probation/Parole:</u></p> <ul style="list-style-type: none"> Has the child/youth been on probation (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Has the child/youth been on parole (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? <p><u>PAF/KET - Conservatorship/Payee:</u></p> <ul style="list-style-type: none"> Has the child/youth been on conservatorship (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Did the child/youth have a payee (PRIOR TO THE LAST 12 	<p><u>PAF/KET - Arrest:</u></p> <ul style="list-style-type: none"> Indicate the number of times the youth has been arrested (PRIOR TO THE LAST 12 MONTHS and DURING THE LAST 12 MONTHS). <p><u>PAF/KET - Probation/Parole:</u></p> <ul style="list-style-type: none"> Has the youth been on probation (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Has the youth been on parole (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? <p><u>PAF/KET - Conservatorship/Payee:</u></p> <ul style="list-style-type: none"> Has the youth been on conservatorship (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Did the youth have a payee (PRIOR TO THE LAST 12 	<p><u>PAF/KET - Arrest:</u></p> <ul style="list-style-type: none"> Indicate the number of times the client has been arrested (PRIOR TO THE LAST 12 MONTHS and DURING THE LAST 12 MONTHS). <p><u>PAF/KET - Probation/Parole:</u></p> <ul style="list-style-type: none"> Has the client been on probation (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Has the client been on parole (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? <p><u>PAF/KET - Conservatorship/Payee:</u></p> <ul style="list-style-type: none"> Has the client been on conservatorship (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Did the client have a payee (PRIOR TO THE LAST 12 	<p><u>PAF/KET - Arrest:</u></p> <ul style="list-style-type: none"> Indicate the number of times the client has been arrested (PRIOR TO THE LAST 12 MONTHS and DURING THE LAST 12 MONTHS). <p><u>PAF/KET - Probation/Parole:</u></p> <ul style="list-style-type: none"> Has the client been on probation (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Has the client been on parole (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? <p><u>PAF/KET - Conservatorship/Payee:</u></p> <ul style="list-style-type: none"> Has the client been on conservatorship (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? Did the client have a payee (PRIOR TO THE LAST 12

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	<p>MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)?</p> <p><u>PAF/KET - Dependant Status:</u></p> <ul style="list-style-type: none"> Has the child/youth been a dependant of the court (W & I Code 300 status) (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)? What was the year that the child/youth was first placed on W & I Code 300 status? <p><u>PAF/3M – Custody Information:</u></p> <ul style="list-style-type: none"> Indicate the total number of children the child/youth CURRENTLY has who are: <ul style="list-style-type: none"> Place on W&I Code 300 status Placed in foster care Reunified with the client Adopted out 	<p>MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)?</p> <p><u>PAF/KET – Dependant Status:</u></p> <ul style="list-style-type: none"> Has the youth been a dependant of the court (W & I Code 300 status) (PRIOR TO THE LAST 12 MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY) What was the year that the youth was first placed on W & I Code 300 status? <p><u>PAF/3M – Custody Information:</u></p> <ul style="list-style-type: none"> Indicate the total number of children the youth CURRENTLY has who are: <ul style="list-style-type: none"> Place on W&I Code 300 status Placed in foster care Reunified with the client Adopted out 	<p>MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)?</p> <p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p> <p><u>PAF/3M - Custody Information:</u></p> <ul style="list-style-type: none"> Indicate the total number of children the client CURRENTLY has who are: <ul style="list-style-type: none"> Place on W&I Code 300 status Placed in foster care Reunified with the client Adopted out 	<p>MONTHS, DURING THE LAST 12 MONTHS and CURRENTLY)?</p> <p>NOT APPLICABLE</p> <p>NOT APPLICABLE</p> <p><u>PAF/3M - Custody Information:</u></p> <ul style="list-style-type: none"> Indicate the total number of children the client CURRENTLY has who are: <ul style="list-style-type: none"> Place on W&I Code 300 status Placed in foster care Reunified with the client Adopted out
Emergency Intervention of any Kind (e.g., emergency room, crisis stabilization, etc.)	<p><u>PAF/KET:</u> Report the number of visits:</p> <ul style="list-style-type: none"> Physical Health Related? Mental Health / Substance Abuse Related? 	<p><u>PAF/KET:</u> Report the number of visits:</p> <ul style="list-style-type: none"> Physical Health Related? Mental Health / Substance Abuse Related? 	<p><u>PAF/KET:</u> Report the number of visits:</p> <ul style="list-style-type: none"> Physical Health Related? Mental Health / Substance Abuse Related? 	<p><u>PAF/KET:</u> Report the number of visits:</p> <ul style="list-style-type: none"> Physical Health Related? Mental Health / Substance Abuse Related?
Health Status	<p><u>PAF/3M:</u> Does the child/youth have a primary care physician (DURING THE LAST 12 MONTHS and CURRENTLY)? Y/N</p>	<p><u>PAF/3M:</u> Does the youth have a primary care physician (DURING THE LAST 12 MONTHS and CURRENTLY)? Y/N</p>	<p><u>PAF/3M:</u> Does the client have a primary care physician (DURING THE LAST 12 MONTHS and CURRENTLY)? Y/N</p>	<p><u>PAF/3M:</u> Does the client have a primary care physician (DURING THE LAST 12 MONTHS and CURRENTLY)? Y/N</p>
Substance Abuse	<p><u>PAF/3M:</u> In the opinion of the partnership service coordinator:</p> <ul style="list-style-type: none"> Does the child/youth have a co-occurring serious emotional disturbance and substance use 	<p><u>PAF/3M:</u> In the opinion of the partnership service coordinator:</p> <ul style="list-style-type: none"> Does the youth have a co-occurring mental illness and substance use problem? Y/N 	<p><u>PAF/3M:</u> In the opinion of the partnership service coordinator:</p> <ul style="list-style-type: none"> Does the client have a co-occurring mental illness and substance use problem? Y/N 	<p><u>PAF/3M:</u> In the opinion of the partnership service coordinator:</p> <ul style="list-style-type: none"> Does the client have a co-occurring mental illness and substance use problem? Y/N

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
	<ul style="list-style-type: none"> problem? Y/N Is this an active problem? Y/N Is the child/youth CURRENTLY receiving substance abuse services? Y/N 	<ul style="list-style-type: none"> Is this an active problem? Y/N Is the youth CURRENTLY receiving substance abuse services? Y/N 	<ul style="list-style-type: none"> Is this an active problem? Y/N Is the client CURRENTLY receiving substance abuse services? Y/N 	<ul style="list-style-type: none"> Is this an active problem? Y/N Is the client CURRENTLY receiving substance abuse services? Y/N
Index of Independent Activities of Daily Living (ADL)				<p>PAF/3M:</p> <p>BATHING – either sponge bath, tub bath or shower</p> <ul style="list-style-type: none"> Receives no assistance (gets in and out of tub by self, if tub is usual means of bathing) Receives assistance in bathing only one part of the body (such as back or leg) Receives assistance in bathing more than one part of the body (or not bathed) <p>DRESSING – gets clothes from closets and drawers, including underclothes, outer garments, and uses fasteners (including braces, if worn)</p> <ul style="list-style-type: none"> Gets clothes and gets completely dressed without assistance Gets clothes and gets dressed without assistance, except for assistance in tying shoes Receives assistance in getting clothes or in getting dressed, or stays partly or completely undressed <p>TOILETING</p> <ul style="list-style-type: none"> Goes to “toilet room”, cleans self, and arranges clothes without assistance (may use object for support such as cane, walker, or wheelchair and may manage night bedpan or commode, emptying same in AM) Receives assistance in going to the “toilet room” or in cleansing self or in arranging clothes after elimination or in use of night bedpan or commode Doesn’t go to room termed “toilet” for the elimination process <p>TRANSFER</p>

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
				<input type="checkbox"/> Moves in and out of bed as well as in and out of chair without assistance (may be using object for support, such as cane or walker) <input type="checkbox"/> Moves in and out of bed or chair with assistance <input type="checkbox"/> Doesn't get out of bed CONTINENCE <input type="checkbox"/> Controls urination and bowel movement completely by self <input type="checkbox"/> Has occasional "accident" <input type="checkbox"/> Supervision helps keep urine or bowel control; catheter is used, or person is incontinent FEEDING <input type="checkbox"/> Feeds self without assistance <input type="checkbox"/> Feeds self except for getting assistance in cutting meat or buttering bread <input type="checkbox"/> Receives assistance in feeding or is fed partly or completely by using tubes or I.V. fluids WALKING <input type="checkbox"/> Walks on level without assistance <input type="checkbox"/> Walks without assistance but uses single, straight cane <input type="checkbox"/> Walks without assistance but uses two points for mechanical support such as crutches, a walker or two canes (or wears a brace) <input type="checkbox"/> Walks with assistance <input type="checkbox"/> Uses wheelchair only <input type="checkbox"/> Not walking or using wheelchair HOUSE-CONFINEMENT <input type="checkbox"/> Has been outside of residence on 3 or more days during past 2 weeks <input type="checkbox"/> Has been outside of residence on only 1 or 2 days during past 2 weeks <input type="checkbox"/> Has not been outside of residence in past 2 weeks
Instrumental Activities of Daily Living (IADL)				PAF/3M: Can the client use the <u>telephone</u> ?

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
				<div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to use the telephone</div><div>Can the client get to places out of <u>walking</u> distance?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to travel unless special arrangements are made</div></div><div>Can the client go <u>shopping</u> for groceries?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to do any shopping</div></div><div>Can the client prepare his/her own <u>meals</u>?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to prepare any meals</div></div><div>Can the client do his/her own <u>housework</u>?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to do any housework</div></div><div>Can the client do his/her own <u>handyman</u> work?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to do handyman work</div></div><div>Can the client do his/her own <u>laundry</u>?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to do any laundry</div></div><div>If the client takes medication (or if the client had to take medication) could s/he take it on his/her own?</div><div><div><input type="checkbox"/> Without help</div><div><input type="checkbox"/> With some help, or</div><div><input type="checkbox"/> Are completely unable to take medication on his/her own</div></div><div>Can the client manage his/her own <u>money</u>?</div></div>

Domain/Measure	Child/Youth (0 - 15 years)	TAY (16 - 25 years)	Adult (26 – 59 years)	Older Adult (60+ years)
				<div><input type="checkbox"/> Without help</div> <div><input type="checkbox"/> With some help, or</div> <div><input type="checkbox"/> Are completely unable to handle money</div>